

CLAIMS ONLY								Application Number <div style="font-size: 1.2em; font-family: cursive;">10-811938</div>		Filing Date	
								Applicant(s)			
* May be used for additional claims or amendments											
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Total Indep											
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Total Claims											

10-811938

Filing Date

Applicant(s)

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CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	12		12			
Total Depend	14		14			
Total Claims	15		15			

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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